STATEMENT OF

FORM 1	ORGANIZATION (See instructions)	Office use only
NAME OF COMMITTEE (in	(Check if name Example: If typying, type full) is changed) over the lines	12FE4M5
Navistar, Inc.	Good Government Committee	
ADDRESS (number and	4201 Winfield Road, P.O. Box 1488	
(Check if address is changed)	Warrenville	IL
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA (Check if address is changed)	L ADDRESS (Please provide only one e-mail address) LMMarshall@Comerica.com	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)		
2. DATE 0.8		
3. FEC IDENTIFICA	TION NUMBER C C00040840]
4. IS THIS STATEM	NEW (N) OR X AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, correct ar Treasurer Cathy Hope	nd complete
Signature of Treasurer	Electronically Filed by Cathy Hope	Date 08 / 11 / Y Y Y Y Y
NOTE: Submission of fa	lse, erroneous, or incomplete information may subject the person signing this Stat	,
Office Use Only	For further information of Federal Election Commiss Toll Free 800-424-9530	